

EMS Education in Virginia

"Old Dominion"

Where We Are and Where We Go From Here



National Documents

- EMS Agenda for the Future Implementation guide
- EMS Education Agenda For The Future
 - EMS Core Content
 - EMS National Scope of Practice
 - EMS Education Standards
 - National Certification
 - National Accreditation

National	State
✓	✓
✓	20%
90%	40%
?	?
2013	✓



Levels

- First Responder → Emergency Medical Responder
- EMT→EMT
- Enhanced → Advanced EMT
- Intermediate 99 → Intermediate*
- Paramedic → Paramedic

^{*} The original presentation at the EMS Advisory Board had Intermediate99. Following the presentation, it was suggested by multiple attendees to remove "99" as that referred to a curriculum more so than a level. Since the Intermediate level will continue in Virginia and evolve, the suffix is being removed. Specific practice capabilities will be determined by the Scope of Practice Ad Hoc committee of the Medical Direction Committee as planned.



- Procedures and Medications
 - Ad Hoc Committee of MDC
 - Stewart Martin, M.D. MDC
 - Asher Brand, M.D. MDC
 - Allen Yee, M.D. MDC
 - Debbie Akers
 - Jeff Meyer Regional Councils
 - Jeff Reynolds PDC
 - Dreama Chandler VAVRS
 - Tom Jarman VAGEMSA
 - Randy Baum EMS Providers
 - Chief James Gray Va. Fire Chiefs
 - George Lindbeck, M.D. State EMS Medical Director



- Procedures and Medications
 - The committee is charged with developing and providing necessary implementation guidelines for a scope of practice for each EMS level receiving Virginia certification in an effort to standardize the practice by identifying a ceiling under which EMS is delivered.
 - Ad hoc committee to:
 - Recommend "Scope" for each level
 - Recommend application process
 - MDC considers recommendations from Ad hoc committee



Pros

- Standardize "Scope"
- Establish ground work for protocols
- Establish ground work toward standardizing drug boxes
- Provide guidance for educational components
- Provide for better oversight for "pilots"
- With practice analysis guide certification
- Guided by codification of the Scope



Cons

- May increase complexity of conducting "Pilots"
- Restricts OMD to a ceiling practice as opposed to previous belief of the unlimited authority for practice?